

Article 5 Section 8 – Miscellaneous Special Programs

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05.08.01 Introduction

General

This section describes the miscellaneous special Medi-Cal programs and applicable individual limitations regarding Medi-Cal eligibility.

05.08.02 Pickle Benefits, Restricted Benefits, and the Repatriate Program

A. 20% Social Security Increase (Pickle Benefits)

Persons who qualify for Medi-Cal under this category were discontinued from SSI/SSP after April 1977, currently receive RSDI benefits, and would be eligible to SSI/SSP benefits if their RSDI COLA increases received after SSI/SSP discontinued were disregarded. The activities in PICKLE cases are handled by specialists in FRCs according to the regulations addressed in [MPG Article 5, Section 10](#).

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B. Restricted Benefits

Restricted benefits provide medical coverage for emergency and pregnancy-related services only. Certain IRCA and OBRA aliens are eligible to restricted benefits. [MPG Article 7, Section 3](#), explains alien status.

C. Repatriate Program

The Repatriate Program is a cash assistance program available to U.S. citizens who have established residence in a foreign country and wish to return to reside in the United States. Persons eligible for cash payments and other assistance under the Repatriate Program are not eligible for Medi-Cal until they are discontinued from the Repatriate Program.

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05.08.03 Tuberculosis (TB), Dialysis and Total Parenteral Nutrition (TPN) Special Treatment Benefits

A. Tuberculosis

The TB program allows clinics and providers who serve TB infected persons to assist such persons in applying for Medi-Cal. This is an alternative to the applicant applying directly at an FRC. These providers may help applicants complete all initial Medi-Cal forms used in the application process and may gather applicant verification. The information will then be forwarded to the county welfare department for a Medi-Cal determination. [MPG Article 5, Section 17](#) explains TB program benefits and details the eligibility determination.

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B. Dialysis and Total Parenteral Nutrition (TPN) Special Treatment Benefits

Special Medi-Cal benefits are available to eligible persons in need of dialysis or TPN services. These benefits are explained in [MPG Article 17, Section 1](#).

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05.08.04 Pregnant Women, Infants and Children Federal Poverty Level (FPL) Programs

A. Presumptive Eligibility	The Presumptive Eligibility (PE) program allows qualified Medi-Cal providers to provide their low-income pregnant patients immediate, temporary Medi-Cal coverage for prenatal care. These patients must then apply formally for Medi-Cal (or CalWORKs) at an FRC or out-stationed clinic site by the end of the month following the month in which PE began. MPG Article 5, Section 16 explains the PE program and eligibility criteria, along with provider and county responsibilities.	MEM PROC. 5M
B. Income Disregard Program	The Income Disregard Program provides zero SOC Medi-Cal to otherwise eligible pregnant women and infants up to one year old. For pregnant women and infants who are eligible to Medi-Cal, the net nonexempt income of the MFBU must be above the maintenance need level but not exceed 200 percent FPL. MPG Article 5, Section 12 explains Income Disregard program benefits and specifies how eligibility for the program is determined.	MEM PROC. 5F
C. Asset Waiver Provision of the Income Disregard Program	The asset waiver provision of the Income Disregard Program provides zero SOC Medi-Cal coverage to eligible pregnant women and infants. To qualify, the MFBU must have nonexempt assets above the Medi-Cal property limits, net nonexempt income not exceeding 200 percent FPL and be otherwise eligible to Medi-Cal (i.e., residency). MPG Article 5, Section 12 explains this provision and details the eligibility determination.	MEM PROC. 5F
D. Postpartum Benefits	Zero SOC Medi-Cal benefits, restricted to postpartum care, are available to certain women for a 60-day period following delivery of a newborn child. MPG Article 5, Section 6 provides an explanation of these benefits.	ACWDL 87-80 88-18
E. 100 Percent Program	The 100 Percent Program provides zero SOC Medi-Cal coverage to eligible children from age six to age nineteen (through eighteen). To qualify for this program, the net non-exempt income of the MFBU must not exceed 100 percent FPL. MPG Article 5, Section 12 , explains the 100 Percent Program benefits and details the eligibility determination.	
F. 133 Percent	The 133 Percent Program provides State-only zero SOC Medi-Cal coverage to eligible children from age one up to and including age five.	ACWDL 90-34

Program

To qualify for this program, the net non-exempt income of the MFBU must be above the maintenance need but not in excess of 133 percent FPL. [MPG Article 5, Section 12](#) explains the 133 Percent Program benefits and details the eligibility determination.

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05.08.05 Medi-Cal to Healthy Families (HF) Bridging Program (Bridging)

A. General

The State passed legislation in 1997 to implement HF, a subsidized private health insurance program for children in families with gross income up to 250 percent FPL.

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State law has since been modified by AB 2780 to create a Bridging program to supply one month of additional full scope zero SOC Medi-Cal to certain children when changes in family circumstances result in the loss of zero SOC Medi-Cal. This extra month allows the family time for their information to be forwarded to HF (with their consent) for a HF evaluation, or for them to contact HF to complete an application before the SOC increases.

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B. Eligibility Requirements

Effective December 1, 1998, to be eligible to the one-month Bridging program, the child must be age one or older, but not yet age nineteen and:

- Be otherwise eligible for HF (*i.e.*, a citizen or qualified alien under 250 percent FPL); AND
- Is still property eligible, but without this program would have a SOC in the next month following their last zero SOC month in either the 100 percent, 133 percent, 1931(b), Medically Needy, Blind and Disabled/MN, or Medically Indigent program; or
- Be discontinued from the Percent programs and is property ineligible; or
- Have a SOC in the next month following the last month as an infant in the Income Disregard program upon reaching age one; or
- Be discontinued from CalWORKs or Edwards period and there is no eligibility for zero SOC Medi-Cal; or
- Be discontinued from SSI/SSP and receives SOC Medi-Cal under Ramos, or reached the end of the Ramos extension and there is no eligibility for zero SOC Medi-Cal; or
- Be discontinued from the TMC and there is no eligibility for zero SOC Medi-Cal.

C. Aid Code

Aid Code 7X will be used for Bridging. The eligible child will be activated under this aid code from the age appropriate MFBU.

D. Prior Period Bridging

There may be instances when a child's full-scope, SOC eligibility in a prior month based on the application is reduced to zero SOC (*i.e.*, fair

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hearing or the County recognizes it failed to act timely on a report of reduced income). The worker will take their usual action to reduce the SOC for that month. If zero SOC eligibility in the prior month is followed by a SOC in the following month, the worker must determine whether Bridging is appropriate.

- If Bridging is appropriate, the worker must grant Bridging for that first SOC month.
- The worker must then determine whether it is appropriate to refer the child to HF in the current month.

**E.
Notification
Requirement**

To meet the Bridging language requirement, the worker must manually print the MC 239 Bridging NOA in CalWIN. The MC 239 Bridging NOA must be mailed to the beneficiary within five working days of determination of SOC. **A case narrative is required to document the date the Bridging NOA was sent.**

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- If the parent/caretaker provided consent as indicated on the HF tab of Collect CHDP/Social Service Request Detail window in CalWIN, the MC-239-Bridging NOA will contain language informing the beneficiary that their information will be forwarded to HF for a HF evaluation.
- If the parent/caretaker did not provide consent as indicated on the HF tab of the Collect CHDP/Social Service Request Detail window in CalWIN, the notice will inform the beneficiary that their information will not be forwarded and that if they are interested in being evaluated for HF to call 1-800-880-5305 to obtain additional information.

**F.
Consent
Requirement**

Workers are required to review the most current application or annual redetermination form to determine whether the beneficiary has provided consent to have information forwarded to HF. The consent status shall be recorded on the HF tab of the Collect CHDP/Social Service Request Detail window. The MC 210, MC 321 HFP, and the MC 210 RV have been revised to include a HF consent section.

- a. If the MC 210 (rev. 8/01) was used as the statement of facts, staff must review question 59 to determine if consent was given.
 - If Question 59 has been answered, "Yes," the application can be forwarded to HF.
 - If Question 59 has been answered, "No," the application cannot be forwarded to HF.

- If Question 59 has not been answered, the worker must follow the directions detailed below as if another form was used.
- b. If the MC 210 RV (rev. 1/06) was used as the annual redetermination form, staff must review question A of Section 8 to determine if consent was withheld.
- c. If another form (e.g.: SAWS 2, DFA 285 A2) was used as the statement of facts, the worker must make an attempt to contact the parent/caretaker in order to provide him/her with the opportunity to give consent to forward the information to HF for an evaluation. The consent does not have to be in writing. The worker will first attempt to contact the parent/caretaker by phone.
- If no phone contact is made, the worker must mail a Bridging Consent Form (TEMP 07-297) within five working days of the SOC determination. **The date that the form TEMP 07-297 was mailed shall be documented in CalWIN, using case comment type of “Bridging Consent Mail.” All attempts at contact shall continue to be narrated in the case.**
 - If consent is received via phone or returned signed consent form, this must also be documented in the Comments Section of the transmittal form (MC 363) and in the case narrative.

G. Referral Process

When a child is determined to be eligible for Bridging, the worker must review the statement of facts to determine if the parent/caretaker has consented to having case information forwarded to HF.

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If the parent/caretaker has provided consent:

- The application must be forwarded to HF within five working days of SOC determination; AND
- **The action must be narrated in CalWIN, using case comment type of “H/F Referral Sent.”**

Detailed instructions on the referral process to HF may be found in [MPG Article 4, Section 20, Item 8](#).

H. Performance Standards

When a child changes from zero SOC to a SOC, state law requires that workers meet specific time frames for processing cases in Bridging:

- Beneficiaries will be sent a notice informing them of HF within **five** working days from the determination of a SOC.
- If the parent has given consent to send information to HF, the

annual MC210 RV will be sent to HF within **five** working days from the determination of a SOC.

- If the parent has not given consent to send information to HF, the worker must send a request to consent to send the information within **five** working days from the determination of a SOC.
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05.08.06 Healthy Families to Medi-Cal Presumptive Eligibility (HFPE) Program

A. General

HFPE extends zero SOC coverage until a worker completes a Medi-Cal eligibility determination when at Annual Eligibility Review (AER) all or some of the family are no longer eligible to HF and appear eligible for zero SOC Medi-Cal based on income screening. This program replaced the Healthy Families to Medi-Cal Bridging program effective 7/1/08.

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B. Aid Code

HFPE uses Aid Code 5E for children whose responsible adult consented to have their AER form forwarded to Medi-Cal for a determination.

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C. Eligibility Determination

Upon determining that a child is potentially eligible for Medi-Cal without a SOC, HF will convert the child's eligibility to 5E and forward the family's latest AER along with all supporting documents to the appropriate county for a Medi-Cal determination. Since the AER serves as a Medi-Cal application, 5E eligibility will continue until a Medi-Cal determination is made.

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The worker must use the HFPE start date as the application date for Medi-Cal. This date is on the HF Administrative Vendor Detail Transmittal Form (HFFM80) under the "AE Start Date" column.

HFPE will continue until the worker completes the eligibility determination.

D. Worker Actions

If the child is...	Then...
Eligible to Medi-Cal	Activate with appropriate aid type.
Not eligible to Medi-Cal	Deny case, send appropriate denial notices and check MEDS to ensure that the 5E AC discontinued.

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E. Citizenship and Identity Verification Requirements

Evidence of citizenship and identity must be provided when ongoing Medi-Cal eligibility is determined unless the individual falls within one of the exemption groups identified in [MPG Article 7, Section 2](#).

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05.08.07 Refugee Medical Assistance (RMA) and Entrant Medical Assistance (EMA)

A. General

United States policy has been to provide asylum and humanitarian assistance to persons subject to persecution in their homelands. Humanitarian resettlement assistance, which is federally funded, will help refugees adapt to their new country, become economically self-sufficient and ultimately participate in and contribute to their new communities. RMA and EMA are forms of humanitarian resettlement assistance, which enable refugees to obtain medical care.

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Refer to [Section 05.08.08](#) for Iraqi and Afghan Special Immigrants.

B. Eligibility Requirements

To be eligible for Medi-Cal through the special federal categories of RMA/EMA, refugees and entrants must first be determined **ineligible** for HF, and Medi-Cal under any other program, including:

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- CalWORKs
- SSI/SSP
- Medi-Cal Only

Eligibility to RMA/EMA is determined individually for each member of a family. If any individual in the family is eligible for one of the programs listed above, then medical assistance for that individual shall be granted under that program and not RMA/EMA.

If a child is eligible for Medi-Cal, but the parents are not, place the child on Medi-Cal and the parents on RMA/EMA provided all other RMA/EMA eligibility requirements are met by the parents.

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If a child appears to be eligible for HF and if the parent(s) consent, the child's application and supporting documentation shall be forwarded to HF for evaluation. Until it is determined that the child will receive HF, the child may receive zero SOC Medi-Cal under the RMA/EMA program.

Refugees ineligible to Medi-Cal due to no linkage must have an RMA/EMA determination completed as there is no linkage requirement for RMA/EMA.

C. Immigration Status Requirements

Applicants must meet the federal definition of "refugee" or "entrant." Refer to [Appendix A](#) for federal definitions.

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Applicants must provide proof of SIS according to [Appendix A](#)

documenting one of the following statuses:

- Conditional Entrant
- Refugee or Asylee
- Permanent Resident Status
- Amerasian
- Cuban/Haitian Entrants
- Victim of Severe Trafficking

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Primary verification of immigration status is required for all RMA/EMA applicants. Acceptable forms of primary U.S. Citizenship and Immigration Services (USCIS) documentation are found in [Appendix A](#).

Secondary verification via SAVE is not required for refugees who have just entered the country and for whom it is unlikely the SAVE system will have information. Based on a waiver granted by the federal government, only primary verification will be required at the time of application. The secondary verification will be delayed until the time of the first redetermination.

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**D.
Income &
Resources**

Income/resources belonging to a refugee on the date he/she signs the SAWS1 application will be used in determining RMA/EMA eligibility.

- If there is an increase in income or property after the SAWS 1 date, the amount of income/resources will not be recalculated.
- If the refugee becomes employed after the application date, the new earnings will not be counted.
- A reported **decrease** in income or property after the SAWS 1 date, however, will be acted upon.

Income

The following will not be counted as income in the RMA/EMA financial eligibility determination:

- RCA,
- In-kind services and/or shelter provided to refugees by a sponsor or resettlement agency,
- Any resources remaining in the refugee's country of origin,
- A sponsor's income and resources, and
- Income earned after the date of application.

To be eligible to zero SOC RMA/EMA, a refugee must have income at or below 200 percent FPL. Zero SOC RMA/EMA will continue for the

duration of the RMA/EMA eligibility, regardless of changes.

If the refugee is above the 200 percent FPL, then he/she will receive RMA/EMA with a SOC. If the income decreases, the SOC will be reduced.

Property

Refugee applicants will be given the opportunity to spend down (as is done for Medi-Cal eligibility) if they do not meet property limits.

E. Aid Code

All RMA/EMA beneficiaries will be aided under Aid Code 02.

F. Time Eligibility Requirements

Under federal and state regulations, eligibility for RMA/EMA shall be limited to the **shorter** of:

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- A refugee's first eight months of U.S. residency, beginning with the month of entry; or
- An asylee's first eight months of asylum, beginning with the month asylum is granted; or
- An entrant's first month of parole (release from USCIS custody).
- The time period for which DHCS determines that sufficient federal funds are available under RRP/CHEP.

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The eight-month time eligibility period begins with the month of entry even if the Date of Entry is the last day of the month. The Date of Entry is equivalent to the month of entry. Refugees determined eligible to RMA/EMA will continue to receive RMA/EMA benefits until the end of the eight-month eligibility period without redetermination or change in benefits.

NOTE: Discontinuance of RCA does not mean the discontinuance of RMA/EMA. If an RCA beneficiary is terminated from RCA for any reason, RMA/EMA must be continued, without redetermination or change in benefits, until the end of the eight-month eligibility period.

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G. Determining Date of Entry

Workers will use the following requirements for determining the Date of Entry:

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If the applicant is a/an...	Then use ...
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Refugee, Cuban/Haitian Entrant, or Amerasian	The Date of Entry indicated on USCIS documents as the first month of entry.
Asylee	The month that they were granted asylum as the Date of Entry.
Citizen child of a refugee	The Date of Entry of the parent. <ul style="list-style-type: none"> If two parents, use the Date of Entry of the parent who arrived in the U.S. last.
Victim of Trafficking, or certain family members	The date of: <ul style="list-style-type: none"> The Certification Letter The T Visa Date of Entry stamped on the passport or I-94 Arrival Record The Notice Date on the I-797, Notice of Action of approval of the Visa.

Refer to [Appendix D](#) for a complete listing of documents used to determine correct entry date.

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H. Victims of Trafficking

Severe Forms of Trafficking

- Sex trafficking in which a commercial sex act is induced by force, fraud or coercion, or in which the person induced to perform such act has not attained 18 years of age; or
- The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion, for the purpose of subjection to involuntary servitude or slavery to repay a debt.

Under the Trafficking Victims Protection Act of 2000, adults and children identified as victims of severe forms of trafficking are entitled to be treated as refugees for the receipt of RMA/EMA benefits. The Trafficking Victims Protection Reauthorization Act of 2003 amended the original act to expand eligibility to certain family members of the victim.

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ORR will certify victims who are willing to assist in the investigation and prosecution of traffickers. Victims must have applied for a visa under Section 101 of the Immigration and Nationality Act and have not been denied or have remained in the U.S. by the request of the Attorney General in order to bring about prosecution of traffickers.

Adults who are victims of severe forms of trafficking will be given a Certificate ([Appendix B](#)) and children under 18 years of age will be

given a Letter ([Appendix C](#)). ORR is the only agency authorized to issue the Certificate and Letter, which will be used as documentation for eligibility to RMA/EMA.

**I.
Required
Actions:
Trafficking
Victims**

Workers shall take the following steps in determining eligibility for victims of trafficking:

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- Accept the original Certification or Letter in lieu of USCIS documentation. USCIS documentation is not required for these applicants. A copy of the Certification or Letter must be retained in the case file. (Do not institute SAVE on these individuals as the information is not yet available.)
 - Call the Trafficking Verification Line at (866) 401-5510 to confirm that the Certificate or Letter is valid and to notify ORR of the benefits for which the applicant has applied.
 - Use the Date of Certification or initial eligibility date from the letter as the Date of Entry for these applicants.
 - Follow all other eligibility requirements for RMA/EMA.
 - Record the expiration date of the Certification or Letter in the case narrative. The expiration date is eight months from the date of certification.
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**J.
Required
Actions:
Family
Members of
Trafficking
Victims**

Family members of Trafficking Victims, eligible to be treated as refugees, must provide a non-immigrant Derivative T Visa T-2, T-3, T-4 or T-5 as verification of eligibility. The following criteria is used to determine a family member's eligibility:

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If...	Then...
The trafficking victim is under 21 years of age,	The Derivative T Visa can also be awarded to the individual's: <ul style="list-style-type: none">• Spouse;• Children;• Parents; and• Unmarried siblings under 18.
The trafficking victim is 21 years of age or over,	The individual's spouse and children can also receive a T Visa.

K.

Trafficking victims and their family members that qualify for RMA must

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Reporting Requirements: Trafficking Victims and Family Members be reported to ORR. Workers are required to notify ORR by calling the Toll-free Trafficking Verification Line at (866) 401-5510.

L. Refugee Coding Requirements Workers must ensure all RMA/EMA beneficiaries have the proper coding in CalWIN:

- USCIS entry date (date of entry for refugees and date asylum is granted for asylees)
- Alien registration number
- Country of origin
- Refugee/alien indicator (see MPG Special Notice 98-11 Addendum B Errata, Attachment A for refugee indicator codes).

M. Sponsored Aliens Individuals who are identified as a Refugee, an Asylee, a Victim of a Severe Form of Trafficking, or a Cuban/Haitian Entrant are exempt from sponsored alien regulations.

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N. Full-time Students Refugees who are full-time students in an institution of higher education are ineligible for RMA/EMA unless it is part of an employability plan developed by a county welfare department or its designee, or is part of a plan for an unaccompanied minor.

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O. Refugees Claiming Disability Workers must request a DDSD evaluation for any refugee who claims to be disabled as part of their RMA/EMA application, even if the refugee is RMA/EMA eligible.

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If disability is established during the during the eight-month RMA/EMA eligibility period and the refugee is otherwise eligible for Medi-Cal, the worker must place the refugee in the appropriate Medi-Cal program upon receipt of the DDSD determination.

RMA/EMA beneficiaries who allege disability at the end of their time-limited eligibility period are **not** eligible to receive Medi-Cal benefits under a Pending Disability Determination. RMA/EMA is not Medi-Cal; therefore RMA/EMA beneficiaries are not considered Medi-Cal beneficiaries.

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**P.
Transitional
RMA/EMA**

There is no longer a separate Transitional Refugee Medical Assistance Program. Under federal regulation, refugees will continue to receive RMA/EMA without redetermination or change in benefits for the remainder of the eight-month time period if they are discontinued from RCA for any reason.

RCA can be cash assistance from the county welfare department, from a voluntary settlement agency or can be a cash grant from the federal Department of State or Department of Justice Reception and Placement Programs.

Refugees discontinued from CalWORKs, SSI or 1931(b) are entitled to receive RMA/EMA if they have exhausted Continuing Medi-Cal benefits prior to the eight-month time limit.

**Q.
Ongoing
Medi-Cal
Evaluation**

A redetermination of eligibility must be completed prior to the end of the eight-month time limit and discontinuance of RMA/EMA. This redetermination must comply with federal regulations, which require that the beneficiary continue to receive Medi-Cal until the determination of ongoing benefits is completed. The redetermination shall include the following procedures:

- The worker must send DHCS 7110 Discontinuance for RMA/EMA notice of action and an MC 210 SOF to the RMA/EMA beneficiary no later than 60 days before the end of the eight-month eligibility period.
- Request additional information from the beneficiary regarding changes in income, property, medical condition, disability status, or household composition.
- RMA/EMA beneficiaries are not required to re-submit information they have already provided if that information has not changed.
- The beneficiary will continue to receive Medi-Cal until the redetermination is completed. If the redetermination is not complete by the end of the eight-month time limit, benefits will be continued under the appropriate Medically Indigent Aid Code until complete.
- RMA/EMA beneficiaries who claim disability status at any time during the eight-month time limit will be required to complete a DDSD evaluation. The beneficiary is entitled to continuing Medi-Cal benefits, according to MPG Special Notice 01-12, Item 3-F, while the DDSD evaluation is being completed.
- Workers must document the result of the redetermination in the case narrative. Timely notice of action must be mailed out prior to discontinuance of benefits.

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NOTE: Under no circumstances is RMA/EMA eligibility to continue beyond the eight-month federal time limit.

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**R.
Tuberculosis**

RMA/EMA refugees with a diagnosis of TB who do not have linkage to any other Medi-Cal program and have no other health coverage may benefit from the TB Medi-Cal program once their eight-month time eligibility period has expired. RMA/EMA beneficiaries with a diagnosis of TB that have SOC Medi-Cal can also be evaluated under the TB Program ([Article 5, Section 17](#)).

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**S.
Resettlement
Agency
Identification**

Voluntary resettlement agencies have Reception and Placement contracts with the federal government. They are to assist newly-arriving refugees for at least 90 days after their arrival. Under federal RMA regulations, the refugee must provide the name of the resettlement agency to the worker. The RMA worker must:

- Contact the resettlement agency and ask what assistance is being provided.
- Narrate the name and address of the agency in the case file.

In-kind services and shelter provided to a refugee by a resettlement agency shall not be counted as income.

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05.08.08 Iraqi and Afghan Special Immigrants (SIs)

A. General

The National Defense Authorization Act of 2008 grants SI status to certain displaced non-citizens, their spouses and children from Iraq and Afghanistan who were employed by or assisted the U.S Armed Forces. These individuals may be eligible to receive a maximum of six months (Afghan) or eight months (Iraqi) of federal time limited RMA.

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B. Eligibility Requirements

Iraqi and Afghan SIs must meet all RMA eligibility requirements in [MPG 05.08.07.B.](#)

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C. Period of Eligibility & Date of Entry

Afghan Special Immigrants

For Afghan SIs and their eligible family members who establish their SI status prior to arriving in the U.S., the six-month eligibility period begins on the date admitted to the U.S. (Date of Entry).

For Afghans and their eligible family members who establish their SI domestically from some other immigration status, the six-month eligibility period begins on the date in which LPR status was granted.

In no circumstances will additional services be provided for the months of eligibility that occurred prior to the effective date of law, December 26, 2007, or prior to application for RMA benefits.

Iraqi Special Immigrants

For Iraqi SIs and their eligible family members who establish their SI status prior to arriving in the U.S., the eight-month eligibility period begins on the date admitted to the U.S. (Date of Entry).

For Afghans and their eligible family members who establish their SI domestically from some other immigration status, the eight-month eligibility period begins on the date in which LPR status was granted.

In no circumstances will additional services be provided for the months of eligibility that occurred prior to the effective date of law, December 26, 2007, or prior to application for RMA benefits.

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**D.
Time Limit
Examples**

The following chart illustrates time limits of eligibility for Afghan and Iraqi SIs:

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Months of Medi-Cal Eligibility for Afghan and Iraqi SIs					
	Months of Possible Eligibility	Date of Entry	Date of Application	Eligibility Ends	# of Benefit Months
Afghan SI	6 months	March 1, 2009	March 1, 2009	August 31, 2009	6 months
Iraqi SI	8 months	March 1, 2009	March 1, 2009	October 31, 2009	8 months
Afghan SI	6 months	March 1, 2009	May 1, 2009	August 31, 2009	4 months
Iraqi SI	8 months	March 1, 2009	April 1, 2009	October 31, 2009	7 months

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**E.
Documentation**

The worker must determine eligibility in accordance with current RMA eligibility requirements. Workers will confirm the SI's immigration status and date of entry through verification of documentation. Refer to [Appendix D](#) for a complete list of acceptable documentation.

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**F.
Income &
Resources**

Iraqi and Afghan SI eligibility shall be determined using the same RMA income and resource requirements in [MPG 05.08.7.D](#).

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**G.
Aid Code and
Coding
Requirements**

Aid Code

Iraqi and Afghan SIs will be aided under Aid Code 02.

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Coding Requirements

Workers must ensure all Iraqi and Afghan SI beneficiaries have the proper coding in CalWIN:

- USCIS entry date (Date of Entry or date LPR status granted)
- Alien registration number
- Country of origin
- Refugee Special Indicators
 - a. Afghan – Afghan-SIV

b. Iraqi – Iraqi SIV

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H. Ongoing Medi-Cal Evaluation

A redetermination of eligibility is required prior to the end of the six- or eight-month time limit and discontinuance of RMA. This redetermination must comply with federal regulations, which require that the beneficiary continue to receive Medi-Cal until the determination of ongoing benefits is completed. The redetermination shall include the following procedures:

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- The worker must send a discontinuance of RMA notice of action and an MC 210 SOF to the RMA beneficiary no later than 60 days before the end of the six- or eight-month eligibility period.
- Request additional information from the beneficiary regarding changes in income, property, medical condition, disability status, or household composition.
- RMA beneficiaries are not required to re-submit information they have already provided if that information has not changed.
- The beneficiary will continue to receive Medi-Cal until the redetermination is completed. If the redetermination is not complete by the end of the six- or eight-month time limit, benefits will be continued under the appropriate Medically Indigent Aid Code until complete.
- RMA beneficiaries who claim disability status at any time during the six- or eight-month time limit will be required to complete a DDSD evaluation. The beneficiary is entitled to continuing Medi-Cal benefits, according to MPG Special Notice 01-12, Item 3-F, while the DDSD evaluation is being completed.
- Workers must document the result of the redetermination in the case narrative. Timely notice of action must be mailed out prior to discontinuance of benefits.

NOTE: Under no circumstances is RMA eligibility for Iraqi and Afghan SIs to continue beyond the six- or eight-month federal time limit.

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APPENDIX A – REFUGEE DOCUMENT IDENTIFICATION CHART

RMA/EMA-ELIGIBLE REFUGEES	DEFINITION	DOCUMENTATION
Refugee	An individual admitted under Section 207 of INA.	I-94- Arrival-Departure Record.
Refugee or Asylee	An individual paroled under Section 212(d)(5) of INA.	I-94 -Arrival-Departure Record.
Asylee	An individual from any country who has been granted asylum under Section 208 of the INA. Date of entry for all asylees is the date asylum is granted.	I-94 -Arrival-Departure Record with admission codes AS-1, AS-2, AS-3; I-94 with Visa 92 (V-92); Order of an Immigration Judge granting asylum; or asylum approval letter from USCIS.
Conditional Entrant	An individual admitted under Section 203(a)(7) of INA.	I-94 -Arrival-Departure Record.
Permanent Resident Status	Person who previously held one of the statuses above and was admitted for permanent resident status.	I-551, Alien Registration Receipt Card, or I-151, or "Green Card". Code of any of the following indicates once held above status: AS6, AS7, AS8, CU6, CU7, IC6, IC7, M83, M93, R86, RE6, RE7, RE8, Y64.
Amerasian	Admitted under the Amerasian Homecoming Act. Only Vietnamese Amerasians are eligible for RMA.	I-94 with code AM1, AM2, AM3; I-551 with AM1, AM2, AM3, AM6, AM7, AM8; Vietnamese Exit Visa, Vietnamese Passport, or U.S. Passport if stamped AM1, AM2, AM3.
Citizen Child Of Refugee	Children born in the US of refugee parents or children born of a refugee and a US citizen living with the refugee parent.	Parents with I-94 or I-551 document with codes as shown above.
RMA/EMA-ELIGIBLE VICTIMS OF TRAFFICKING	DEFINITION	DOCUMENTATION
Adult Victims of Severe Forms of Trafficking	Sex trafficking involving a forced or coerced commercial sex act or the recruitment of a person for labor through the use of force for the purpose of subjection to involuntary slavery.	Certification issued by ORR.
Children Victims of Severe Forms of Trafficking (Under 18 Years Old)	Sex trafficking involving a commercial sex act forced by a child under 18 or the recruitment of a person under 18 for labor through the use of force for the purpose of subjections to involuntary slavery.	Letter for children issued by ORR.

RMA/EMA-ELIGIBLE REFUGEES	DEFINITION	DOCUMENTATION
Cuban-Haitian Entrant Program:	<p>1. Cuban or Haitian Nationals</p> <p>2. Cuban or Haitian Nationals who are subject of exclusion or deportation proceedings unless a final order of deportation has been issued.</p> <p>3. Cuban or Haitian nationals who have an application for asylum pending with INS unless a final order of deportation or exclusion has been issued.</p> <p>4. Cuban or Haitian Nationals granted parole for Humanitarian reasons or in the Public Interest unless a final order of deportation or exclusion has been issued.</p> <p>5. Cuban or Haitian Nationals paroled into the U. S. from Guantanamo or Havana with special status under the Immigration laws for Cuban/Haitians.</p>	<p>1. I-94 with "Cuban/Haitian Entrant (Status Pending)"</p> <p>2. I-94 and notices or letters indicating on-going deportation proceedings.</p> <p>3. I-94 with notation "Form I-589 filed"</p> <p>4. I-94 with the word "Parole" or a reference to Section 212(d)(5)"</p> <p>5. I-94 with stamped notation "Public Interest Parole per Presidential Policy dated October 14, 1994"</p>
RMA/EMA INELIGIBLE REFUGEES	DEFINITION	DOCUMENTATION
Applicants for Asylum	Not eligible until asylum has been granted under Section 212(d)(5) or Section 208 of INA.	
Humanitarian Parolee	Person residing in U.S. under color of law. Paroled under 212(d)(5) of INA.	I-94 - Arrival-Departure Record-Parole Edition
Public Interest Parolee	Person who has been rejected for refugee status. Paroled under 212(d)(5) of INA.	I-94 - Arrival-Departure Record-Parole Edition

APPENDIX B – VICTIMS OF TRAFFICKING CERTIFICATION FOR ADULTS



DEPARTMENT OF HEALTH & HUMAN SERVICES

ADMINISTRATION FOR CHILDREN AND FAMILIES
370 L'Enfant Promenade, S.W.
Washington, D.C. 20447

HHS Tracking Number
5555555555

Ms. Susie Doe
c/o Jim Thomas, Refugee Social Worker
Smith County Community Service Office
123 Main St.
Bellevue, WA 55555-5555

CERTIFICATION LETTER

Dear Ms. Doe:

This letter confirms that you have been certified by the Department of Health and Human Services (HHS) pursuant to section 107(b) of the Trafficking Victims Protection Act of 2000. Your certification date is _____. This certification is valid for eight months from the date of this letter. The expiration date is _____.

With this certification, you are eligible for benefits and services under any Federal or State program or activity funded or administered by any Federal agency to the same extent as an individual who is admitted to the United States as a refugee under section 207 of the Immigration and Nationality Act, provided you meet other eligibility criteria. This certification does not confer immigration status.

You should present this letter when you apply for benefits or services. Benefit-issuing agencies should call the trafficking verification line at (202) 401-5510 to verify the validity of this document and to inform HHS of the benefits for which you have applied.

Sincerely,

Carmel Clay-Thompson
Acting Director
Office of Refugee Resettlement

APPENDIX C – VICTIMS OF TRAFFICKING LETTER FOR CHILDREN UNDER 18



DEPARTMENT OF HEALTH & HUMAN SERVICES

ADMINISTRATION FOR CHILDREN AND FAMILIES
370 L'Enfant Promenade, S.W.
Washington, D.C. 20447

HHS Tracking Number
5555555555

Ms. Susie Doe
c/o Jim Thomas, Refugee Social Worker
Smith County Community Service Office
123 Main St.
Bellevue, WA 55555-5555

Dear Ms. Doe:

This letter confirms that, pursuant to section 107(b) of the Trafficking Victims Protection Act of 2000, you are eligible for benefits and services under any Federal or State program or activity funded or administered by any Federal agency to the same extent as an individual who is admitted to the United States as a refugee under section 207 of the Immigration and Nationality Act, provided you meet other eligibility criteria.

Your initial eligibility date is _____. This eligibility is valid for eight months from the date of this letter.
The expiration date is _____.

You should present this letter when you apply for benefits or services. Benefit-issuing agencies should call the trafficking verification line at (202) 401-5510 to verify the validity of this document and to inform HHS of the benefits for which you have applied.

Sincerely,

Carmel Clay-Thompson
Acting Director
Office of Refugee Resettlement

APPENDIX D – REFUGEE ENTRY DATE DETERMINATION CHART

Workers will determine Date of Entry for refugees, asylees, victims of severe forms of trafficking, and certain family members using the following documentation:

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RMA/EMA-ELIGIBLE REFUGEES	DOCUMENTATION
Refugees (Not Indochinese)	<ul style="list-style-type: none"> • I-94 under INA Sec. 212(d)(5) with notation Refugee • I-766 with code A04 • I-688B under INA Sec. 274a.12(a)(4) • I-94 under INA Sec. 207 with code RE-1, RE-2, RE-3, RE-4, RE-5 • I-766 with code A03 • I-688B – under INA 274a.12(a)(3) • INS Form I-571
Indochinese Refugees	<ul style="list-style-type: none"> • I-94 under INA Sec. 212(d)(5) with notation Refugee • I-94 under INA Sec. 207 • I-551 with code IC6/ IC7
Cuban/Haitian Entrants	<ul style="list-style-type: none"> • I-94 with stamp showing Cuban/Haitian Entrant under INA Sec. 212(d)(5) • I-551 with code CH6 • Cuban/Haitian Passport with INA Sec. 212(d)(5) with stamp date after 10/10/80 • I-766 with code C11 • I-766 with code A04 • I-688B under INA Sec. 274a.12(a)(4) • I-688B under INA Sec. 274a.12(c)(11) • INS Form I-221 • INS Form I-862 • INS Form I-220A • INS Form I-122 • INS Form I-221S • INS Form I-589 stamped by Executive Office for Immigration Review (EOIR) • EOIR-26 • I-766 with code C10 • I-688B under INA Sec. 274a.12©(10) • Notice of Hearing date before Immigration Judge • I-766 with code C08 • I-688B under INA Sec. 274a.12©(8)
Amerasians	<ul style="list-style-type: none"> • I-94 with code AM-1, AM-2, or AM-3 • I-551 with code AM-6, AM-7, or AM-8 • Vietnamese Exit Visa with code AM-1, AM-2, or

	<p>AM-3</p> <ul style="list-style-type: none"> • Vietnamese Passport with code AM-1, AM-2, or AM-3 • United States Passport with code AM-1, AM-2, or AM-3 • Form I-551 with code RE6, RE7, RE8, RE9, AS6, AS7, AS8, CH6, HA6, HB6, GA6, GA7, or GA8 • Foreign Passport with temporary I-551 Stamp with code RE6, RE7, RE8, RE9, AS6, AS7, or AS8
VICTIMS OF SEVERE FORMS OF TRAFFICKING	DOCUMENTATION
Adult Victims of Severe Forms of Trafficking	<ul style="list-style-type: none"> • ORR Certificate (Appendix B)
Child Victims of Severe Forms of Trafficking	<ul style="list-style-type: none"> • ORR Letter (Appendix C)
Family Members of Victims of Severe Forms of Trafficking	<ul style="list-style-type: none"> • Derivative T Visas with code T-2, T-3, T-4, or T-5 • Passport • I-94 • I-797-Notice of Action of Approval of the Visa
RMA/EMA-ELIGIBLE ASYLEES	DOCUMENTATION
Asylees (not Kurdish/Iraqi)	<ul style="list-style-type: none"> • I-94 under INA Sec. 208 • I-94 with code AS-1, AS-2, AS-3 • INS Form I-571 • I-766 with code A05 • I-688B INA Sec. 274a.12(a)(5) • Order of Immigration Judge Granting Asylum under INA Sec. 208 • Asylum Approval Letter from INS Asylum Office • Written Decision from Board of Immigration Appeals • I-551 with codes AS6, AS7, AS8
Kurdish/Iraqi Asylees	<ul style="list-style-type: none"> • I-94 under INA Sec. 208 or 108(a) • I-94 or I-551 with codes AS6, AS7, AS8o • Medical Document (Form 157) • EAD Card with QF1-Asylum Granted • QT-II and QT-III – Paroled in the Public Interest (274a.12.(a)(5) or 274.(c)(11)

APPENDIX E – SPECIAL IMMIGRANT (SI) DOCUMENTATION: IMMIGRATION STATUS AND DATE OF ENTRY

The following documents confirm both immigration status and date of entry for Iraqi and Afghan Special Immigrants:

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DOCUMENTS ACCEPTABLE for CONFIRMING IMMIGRATION STATUS and DATE OF ENTRY	
RMA- ELIGIBLE SI	DOCUMENTATION
Principal Applicant Iraqi or Afghan SI – Status Established Prior to Arrival in the U.S.	<ul style="list-style-type: none"> • Iraqi or Afghan Passport with an immigration stamp noting that the individual has been admitted under Immigrant Visa Category SI1 or SQ1, and one of the following: <ul style="list-style-type: none"> ◦ DHS stamp or notation on passport, or ◦ I-94 showing Date of Entry
Spouse of Principal Applicant Iraqi or Afghan SI in SI1 or SQ1 Category	<ul style="list-style-type: none"> • Iraqi or Afghan Passport with an immigration stamp noting that the individual has been admitted under Immigrant Visa Category SI2 or SQ2, and one of the following: <ul style="list-style-type: none"> ◦ DHS stamp or notation on passport, or ◦ I-94 showing Date of Entry
Unmarried Child Under 21 Years of Age of Iraqi or Afghan SI in SI1 or SQ1 Category	<ul style="list-style-type: none"> • Iraqi or Afghan Passport with an immigration stamp noting that the individual has been admitted under Immigrant Visa Category SI3 or SQ3, and one of the following: <ul style="list-style-type: none"> ◦ DHS stamp or notation on passport, or ◦ I-94 showing Date of Entry
Principal Applicant Iraqi or Afghan SI Principal Adjusting Status in the U.S.	<ul style="list-style-type: none"> • DHS Form I-551 showing Iraqi or Afghan nationality (or Iraqi or Afghan passport) with an immigrant visa code of SI6 or SQ6
Spouse of Principal Applicant Iraqi or Afghan SI in SI6 Category	<ul style="list-style-type: none"> • DHS Form I-551 showing Iraqi or Afghan nationality (or Iraqi or Afghan passport) with an immigrant visa code of SI7 or SQ7
Unmarried Child Under 21 Years of Age of Iraqi or Afghan SI in SI6 Category	<ul style="list-style-type: none"> • DHS Form I-551 showing Iraqi or Afghan nationality (or Iraqi or Afghan passport) with an immigrant visa code of SI9 or SQ9

APPENDIX F – BRIDGING QUESTIONS AND ANSWERS

Question #1 Performance Standard #3 provides that families who have not consented to sending the child's annual RV form to HF shall be sent a consent request. Does the 3rd Performance Standard preclude the worker from trying to call the family first instead of sending the consent form?

Response No. If the worker makes contact with the beneficiary by phone, the worker only needs to document that contact in the case. To meet the performance standard, the worker would have to have made the call within five working days of the SOC. However, if the worker is unsuccessful in reaching the beneficiary by phone, the consent form (TEMP 07-297) still will have to be sent within five working days of the SOC determination.

Question #2 If the most recent application has a consent section relating to Bridging and the family does not consent, is the worker still required to send the consent form (TEMP 07-297)?

Response Yes. If consent was not given on the most recent application, the worker must follow the requirements of any applicable performance standard to obtain consent.

Question #3 Is a child eligible for Bridging in the month the child turns 19?

Response Yes. If otherwise eligible, such children are placed in Bridging in the month they turn age 19, but they are not included in Bridging performance standards, nor are they referred to HF.

Question #4 Is a child eligible for Bridging who is already enrolled in the Healthy Families program if he/she meets all the Bridging requirements?

Response Yes. The Bridging requirements do not specify that the child cannot already be enrolled in HF.
